FORM DPW-CIA 2/05

RECEIVED - DAGS STATE OF HAWAII Division of Public Works Division of Public Works

MONTHLY ESTIMATE

2012 DEC -5 PM 1:38

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			a tha cheadraid fine years or should	endrida genera y governmente se salvado en medicamental, este medicament	Date:	Decem	ber 3, 2012	
CONTRACTOR:	Elite Pacific	Constru	ction, l	nc.		endadine.		
ADDRESS:	46-174 Kahuhipa Street, suite B2				Contract No.	60826 [
City, State ZIP:	Kaneohe, HI	96744			DAGS Job No.	12-20-2	643	
PROJECT TITLE:	Hawaii State	Hospita	I Wate	r System Impro	vements			
CONTRACT					FOR INSPECTION BRANCH USE [] SUBMITTAL REGISTER		MENCEMENT REQUIREMENTS	
Basic Contract A	mount	\$		1,119,900.00	DUE MONTHLY:			
					[] PROJECT SCHEDULE - INITIAL & C	ONGOING		
					[] DAILY REPORTS	[] PA	YROLL AFFIDAVITS	
					MONTHLY ESTIMATE CHECKLIST	<u>-</u>		
CHANGE ORDE	<u>RS</u>				[] CONTRACT NUMBER	[] PRC	DJECT NAME & LOCATION	
Total \$	-	-			[] ALL SIGNATURES			
Adjusted Contrac	t Amount	\$		1,119,900.00				
WORK ACCOME	PLISHED		<u>Ba</u>	sic Contract	Change Order		<u>Total</u>	
Completed to Date	te	4.9%	\$	54,670.00	#DIV/0! \$ -	\$	54,670.00	
Retained	REDUCED []	\$	3,983.00	\$ -	\$	3,983.00	
Amount Subject t	o Payment		\$	50,687.00	\$ Francisco-cione esse escansistante	\$	50,687.00	
Payments to Date	•		\$	-	\$ -	\$	-	
Payments Now D	ue		\$	50,687.00	-	\$	50,687.00	
Payment No.	FINAL []	1						
Computed and Checked by:					I certify that the above bill is correct, just,	that payment	has not been received and all	
Circl 24	1 thi	madel #		12/6/12	payroll affidavits have been submitted, are c made to this request.			
3. Recommended:	Project Inspector or Engine	eer		Date:	Elite Pacific (Constuc	tion. Inc.	
Mari (ン)~^^			12/4/12	Name of Contractor			
4. Recommended: Clyll X	Area Engineer/Architect	The state of the s	DEC	7 2012 Date:	Charles Buckingham/ Pro	oject Ma	anager (z/w/)	
5. Approved: The Public Works Administrator	Branch Chief or District Eng		n issued ar	Date:	By signature / Title:	-,	Date	
I will	julo		EC -	7 2012				

Date:

State Public Works Administrator

BASIC CONTRACT - PRIME & SUB CONTRACTOR RETAINAGE CALCULATION

STATE OF HAWAII

Department of Accounting and General Services Division of Public Works

For the Month of: November

CONTRACTOR:

Elite Pacific Construction, Inc.

Contract No.: 60826

DAGS Job No.: 12-20-2643

PROJECT TITLE:

Hawaii State Hospital Water System Improvements

CLOSED	1	TRADE	LICENSE NO.	BASIC CONTRACT AMOUNT	COMPL. TO DATE	% CMPL	RETN %	1
	Elite Pacific Construction, Inc.	General Contractor	ABC-23456	\$1,119,900	\$54,670	4.88%	5.0%	\$2,733.00 A

								SUB- CONTRACT
			LICENSE	BASIC SUB-CONTRACT			RETN	AMOUNT
SUBCONTE	<u>RACTOR</u>	TRADE	NO.	<u>AMOUNT</u>	COMPL. TO DATE	% CMPL	<u>%</u>	RETAINED
Unitek		Abatement		\$16,962	\$15,000	88.43%	5.0%	\$750
RHS Lee		Demolition		\$123,000	\$10,000	8.13%	5.0%	\$500
Allied Security	Fence	Fencing		\$23,458		0.00%	5.0%	\$0
Pacific Comm	ercial Serv.	Oil Sand Sampling		\$35,000		0.00%	5.0%	\$0
Paradise Rein	forcing	Reinforcing Steel		\$13,867		0.00%	5.0%	\$0
M&M Tanks		Water Tank		\$287,220		0.00%	5.0%	\$0
Ted's Wiring		Electrical		\$84,844		0.00%	5.0%	\$0
Quality Genera	al	Concrete		\$73,100		0.00%	5.0%	\$0
							<u> </u> -	
Total Retained	from Subs							\$1,250

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ſ	BASIC CONTRACT - RETAINED FROM PRIME AND SU	JBS (A+B) \$3,983.00	٦

I certify that the above retentions are correct for this request.

Elite Pacific Construction, Inc.

Name of Contractor

Charlie Buckingham, Project Manager

By Signature

Date

Checked/Verified by:

Initial - Project Inspector or Engineer

Columnar totals shall be equal in dollar value to that on

the Monthly Estimate Sheet

STATE OF HAWAII DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES DIVISION OF PUBLIC WORKS Monthly Payment Slip

PAYMENT NO.: 1

PROJECT TITLE: HAWAII STATE HOSPITAL - WATER SYSTEM IMPROVEMENTS

BILLING MONTH: November-12

DAGS JOB NO.: 1 2-20-2643

CONTRACT NO.: 60826

CONTRACTOR: ELITE PACIFIC CONSTRUCTION, INC.

VENDOR CODE: 29794000

Original C	ontract Payment	Suffix: 1			
<u>Suffix</u>	Fund Symbol		Amount Earned	<u>Retainage</u>	Amount Due
01	B11-406M		\$54,670.00	\$3,983.00	\$50,687.00
Section Section Control Control			- I also the second sec	cast data se A. Manata da da comunicada da da da da da Arabadora de Calabra da Calabra d	
name and the same of the same		***************************************			
		Totals:	\$54,670.00	\$3,983.00	\$50,687.00
Change O	rder Payment	Suffix: 2			
<u>Suffix</u>	Fund Symbol		Amount Earned	<u>Retainage</u>	<u>Amount Due</u>
02	B11-406M		\$0.00	\$0.00	\$0.00
subtract Annahomorphisms					
wateronine		***************************************	VV-0,000.0000000000000000000000000000000		

		Totals:			

Verified By

(This Section for Administrative Services Office Use Only)

Vendor Code 29794000

Cost Code 3A1

Voucher No. 12079 No 1

Verified By

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